ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. Adams St., suite 4600, Phoenix, Arizona 85007 Phone (602) 364-1 PET (1738) FAX (602) 364-1039 VETBOARD.AZ.GOV

COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY

	Date Received: Jan 27,	2021	Case Nui	mber: <u>21-84</u>	no scorpe per			
A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING: Name of Veterinarian/CVT: Lorna Lanman Premise Name: Petsvet Animal Hospital								
	Premise Address: 15808 N E City: Surprise Telephone:	state: Az		Zip Code: <u>85378</u>	-			
В.	Name:		IDUAL FILING	COMPLAINT*:				
	Address: City: Cit	State:			_			
	Home Telephone: Cell Telephone:							

^{*}STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

C.	PATIENT INFORMATION (1): Name: Iggy Pup Breed/Species: Dachshund mix								
			Color: Black and Tan						
	PATIENT INFORMATION (2):								
	Name:								
	Breed/Species: _								
	Age:	Sex:	Color:						
D.	VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE: Please provide the name, address and phone number for each veterinarian. Dr. Lorna Lanman 6239103242 15808 N El Mirage Rd Surprise, AZ 85378 Vet tech at the clinic I do not know her name but she has long blonde hair and glasses. WITNESS INFORMATION: Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.								
	Attesta	tion of Person Requ	esting Investigation						
and any	l accurate to the and all medicestigation of this Signature:	e best of my knowledged records or information case.	formation contained herein is true ye. Further, I authorize the release of ation necessary to complete the						
	Date:	7/21							

E.

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

My dog, Iggy Pup, was diagnosed with Intervertebral Disc Disease by his primary vet with an X-ray that showed several ruptured discs in his spine. He had been having issues since he was a year old and he is now four. He has random flare ups of pain that normally go away when he takes prednisone, but this time around the pain just seemed to be getting worse no matter what we tried. For two days he screamed any time he moved or anything touched him even it was extremely lightweight curtains brushing against him, and the pain spread to his neck and tail. He was just walking in circles and crying.

At 6PM on Thursday, January 21 2021, I called the Petsvet after hours line, even though this is not Iggy's vet and had never been seen here before, because I knew he needed immediate care but we could not afford to take him to the bluepearl animal hospital, and no one else was available. I was told to bring him in immediately.

When we arrived we were brought back and Iggy was seen by Dr. Lanman and her vet tech (I did not get her name, she has long blonde hair and black glasses). I was present the entire time. They weighed him and then Dr. Lanman, never touching his back at this point, felt Iggy's stomach and said that his problem is a stomachache, not a bad back. She had not done any imaging, nor touched his back, no ultrasound or anything - she just felt his belly and said she can feel that he is getting a "colic" and has a bad diet. I was surprised to hear this because he eats a raw, healthy diet that is just air dried chicken and beef with a tiny bit of pumpkin, or he eats air dried kibble-style raw food that is, again, just chicken, beef, sweet potato, carrots, peas, and pumpkin. But Dr. Lanman claimed he must have been on a bad diet for years. She said that sweet potato, pumpkin, carrots, and peas are bad for dogs, because, in her words, "dogs don't eat that in the wild". She also told me that dogs need to eat warm food in the winter and cold food in the summer, just like humans do. She said this would help his stomach problem.

Dr Lanman and her vet tech got a small tube of raw beef out of the freezer, and bags of ground/shredded chicken, duck, turkey, and I believe deer (apologies I don't remember the last meat she had, but I think it was deer.) Dr. Lanman and the vet tech held Iggy down and pushed the tube of ground beef into his side, knowing that he cried when anything touched his side. They did the same thing with every other bag of meat. I did not want to intervene because I didn't want to sound arrogant or like I know more than a professional, and I truly wanted to believe they were doing something that would help my dog. Then Dr. Lansman concluded, from doing this bizzare test (I was told by another vet that this is an ancient Chinese method that has no basis in science), that lggy should only eat beef and duck and none of the other foods she jammed into his painful side based on "how his body responded", maybe because he cried when they jammed frozen hard chunks of meat into his side. She loaded him up with numerous shots but didn't tell me what she was giving him, and gave him an IV. She told me I needed to purchase food from them, which I did because I thought it might help and maybe it really was his belly and not his back. At this point she finally touched his back, jamming her knuckles into his broken spine. She said his spine "calcified" and that it was not the problem. She sent us home with a \$200 bill and a liquid medication she told me to give him twice a day, but then told me to give it three times a day when I called the clinic the following morning to say he was not getting any better.

Section F:

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\$200 bill and a liquid medication she told me to give him twice a day, but then told me to give it three times a day when I called the clinic the following morning to say he was not getting any better.

Iggy continued to get worse and then started to cry if anything touched his throat. I am wondering if it was the medication she gave. His pain got worse and worse and he screamed until my boyfriend took him to Bluepearl animal hospital at 3AM on Saturday, January 30 2021. They confirmed his back was the problem, not his belly, gave him a shot of morphine just to stop the screaming and pain and sent him home with a referral to get imaging on Monday.

I have read through the reviews on Yelp for Dr. Lanman's clinic and have found that she has done this with numerous other people trying to get them to purchase food from her. I am appalled that she is practicing these nonsensical methods and I feel stupid that I almost believed her lies. I truly believe she is just trying to get people to buy dog food and charge insane prices for abnormal tests that are not backed by science or based in reality, and do more harm to animals than help them at all. I truly believe if I had gone back there she would have just charged more money and continued to neglect his back and his pain, especially as this is an experience many other have documented having at her clinic as I saw on Yelp. I also think they hurt Iggy further by pushing frozen meat into his side that is already messed up from his IVDD nerve damage. They have no business practicing. I do not care about a refund as much as I care about making sure no other animals are hurt/have their needs neglected in order to make food sales from this dangerous place.

21-84

February 15, 2021

In re: 21-85 (Lorna Lanman, DVM)

To Whom It May Concern:

On January 21,2021, I was told we had an emergency coming in that was a client that we had not seen before, who had a painful animal. When the client arrived after our business hours had closed, our receptionist stated that this animal, a dog, was already in our computer system under another name, when given this information, the person bringing the dog in confirmed that she was not the owner and could not give our technician any information about the dog's health history other than that the dog had been treated for a disc disease and had been on Prednisone and Gabapentin for a very long time.

After checking the dog's vitals, temperature, pulse and respiration, we had the lady put the dog on the floor. The dog walked around normally, showing no signs of paresis or paralysis. We then examined the dog further and found that the dog's abdomen was very tense to palpation. The dog did not elicit any pain response when I digitally examined the entire spine from Cervical 1 to the tail. When I again palpated the abdomen, the dog elicited a pain response. I then asked the lady what the dog had been eating and she said the dog had been on an excellent diet of raw foods. We then discussed the problems associated with raw food diets and the ingredients that were being fed and how we use applied kinesiology to see if the dog reacts positively or negatively to certain ingredients. We also explained to the lady that dogs have digestive tracts different than herbivores n omnivores and are not able to properly digest certain ingredients. These ingredients may cause dogs to get a colic like syndrome, and the dog may be experiencing this syndrome. I gave the dog an injection of Cerenia for pain relief along with Butorphanol for additional pain relief. We also discussed slowly reducing the amount of prednisone as this too might be causing intestinal

problems. We prescribed sucralfate and explained that this drug will coat the digestive tract. We recommended a different diet and that the dog should be brought back for re- evaluation.

Since the owner was not with this dog and this person did not know the health history of this dog, I did not feel comfortable dispensing any opioid medications to this person. Instead, we gave appropriate pain medication and sucralfate.

We asked the lady to report back to us the next day, which she did, saying there was some improvement, but she did not show up for the scheduled follow up exam. Thank you.

Dr. Lorna Lanman, DVM



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INVESTIGATIVE COMMITTEE REPORT

TO: Arizona State Veterinary Medical Examining Board

FROM: AM Investigative Committee: Robert Kritsberg, DVM - Chair

Christina Tran, DVM
Carolyn Ratajack
Jarrod Butler, DVM
Steven Seiler - ABSENT

STAFF PRESENT: Tracy A. Riendeau, CVT - Investigations

Marc Harris, Assistant Attorney General

RE: Case: 21-84

Complainant(s):

Respondent(s): Lorna Lanman, D.V.M. (License: 3480)

SUMMARY:

Complaint Received at Board Office: 1/27/21

Committee Discussion: 7/13/21

Board IIR: 8/18/21

APPLICABLE STATUTES AND RULES:

Laws as Amended August 2018

(Lime Green); Rules as Revised September

2013 (Yellow).

On January 21, 2021, "Iggy Pup," a 4-year-old male Dachshund mix was presented to Respondent for crying out in pain and decreased appetite. The dog was examined; Respondent palpated a tense abdomen and performed applied kinesiology to determine the correct diet the dog should be fed. The dog was administered SQ fluids and pain medication and was discharged with sucralfate.

On January 24, 2021, due to the dog's continued pain, the dog was taken to an emergency facility. It was determined that the dog was having back pain due to previously diagnosed intervertebral disc disease. The dog was treated with pain medication and was discharged.

On February 3, 2021, the dog was evaluated by a neurologist who determined the dog's pain was likely caused by a herniated disc causing compression on the spinal cord.

Complainant was noticed and did not appear.

Respondent was noticed and appeared telephonically. Counsel, David Stoll, appeared.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative:
- Respondent(s) narrative/medical record: Lorna Lanman, DVM
- Consulting veterinarian(s) narrative/medical record: Sun City West; BluePearl; and Veterinary Neurological Center.

PROPOSED 'FINDINGS of FACT':

- 1. In 2018 the dog was diagnosed with intervertebral disc disease (IVDD) and was currently on prednisone and gabapentin for pain. The dog would have periodic flare ups of pain which could be controlled by the medications. The dog had an episode of pain, which appeared to be getting worse, and the medications were not helping according to Complainant.
- 2. On January 21, 2021, the dog was presented to Respondent for evaluation of back pain. According to Complainant, Respondent palpated the dog's abdomen and stated that she could feel the dog was getting colic and had a bad diet. Respondent did not touch the dog's back or recommend diagnostics. Instead, Respondent and her staff took small bags of a variety of frozen meats and pressed the bags into the dog's side. Afterwards, based on the way the dog reacted to the test, Respondent stated the dog should only eat beef and duck. Complainant was told that she needed to purchase the dog's food from them, administered treatments and discharged the dog.
- 3. According to Respondent, the dog was presented to her with history of disc disease and was being treated with prednisone and gabapentin for a long time. The dog had been crying in pain and not eating. Complainant reported the dog ate a raw diet. Upon exam, the dog had a weight = 10 pounds, a temperature = 101.1 degrees, a heart rate = 118bpm, and a respiration rate =50rpm. Respondent noted the dog had a tense painful abdomen and a normal, strong back when manipulated. Her assessment was that the dog had a food intolerance; severe colic/gastroenteritis. Respondent stated that she discussed with Complainant the problems associated with feeding raw diets and how she uses applied kinesiology to see if the dog reacts positively or negatively to certain ingredients. She also discussed tapering the amount of prednisone being administered as this could cause intestinal issues.
- 4. After performing applied kinesiology, Respondent recommended feeding the dog beef and rabbit. The dog was administered 150mLs of Normosol-R SQ, torbutrol 1mg SQ, and cerenia 4mg SQ. Respondent recommended continuing with gabapentin and tapering the prednisone. The dog was discharged Sucralfate liquid 1gm (give 3mLs orally every 12 hours) and a recheck was recommended in 24 48 hours.
- 5. The following day, Complainant called Respondent's premises to report that the dog was doing somewhat better, but would still cry out in pain when touched. The dog was drinking but not eating.
- 6. On January 24, 2021, the dog was presented to Dr. Reeder on emergency due to continued pain. The dog's history of IVDD was reported the dog was currently experiencing pain and decreased appetite. Dr. Reeder noted the dog had marked pain upon palpation of the thoracolumbar spine. The dog vocalized and tensed when the area was palpated and the reaction was repeatable. The dog was administered buprenorphine. Dr. Reeder spoke with Complainant's boyfriend who had presented the dog; she recommended continuing the gabapentin and prescribed amantadine to help with chronic pain. Dr. Reeder stated that the dog's decreased appetite could be secondary to pain or Gl upset from prednisone therapy. The dog was discharged with recommendations to return if the dog's pain returned.

Page 2	 	
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7. On February 3, 2021, the dog was presented to Dr. Plummer at Veterinary Neurological Center for evaluation. Dr. Plummer examined the dog and determined that the dog's progression of clinical signs were likely due to a herniated disc causing compression of the spinal cord or nerve. Dr. Plummer recommended spinal CT imaging for a definitive diagnosis – Complainant declined and elected to continue medical management with strict rest and pain medications.

COMMITTEE DISCUSSION:

The Committee discussed that Respondent was focused on gastrointestinal issues and did not feel the dog's symptoms were related to the IVDD. If Respondent felt the dog was having abdominal pain, there were no diagnostics offered to verify her suspicions. The Committee felt that applied kinesiology is typically not a stand-alone diagnostic tool and is used in conjunction with other diagnostics. Respondent did not reach out to the pet owner to discuss the dog's true history of IVDD.

The Committee further discussed that some dachshunds can have no pain symptoms but have true cervical or lumbar disc disease; the pet's nervousness can mask the pain. The dog's abdominal pain was likely secondary to the dog's IVDD, which Respondent missed. It was hard to determine if Respondent missed it because she did not know better.

Complainant advised Respondent of the dog's previous diagnosis of IVDD and the medications the dog was currently taking was for pain. Respondent acknowledged that; however, her focus was on a gastrointestinal issue. She did provide pain medications along with diet and changing the medication regime.

There were concerns that there was no list of differentials for other possible issues and there was no plan noted if the dog did not improve. There were no diagnostics performed or offered to further work up her suspected gastrointestinal issues versus IVDD.

COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that possible violations of the Veterinary Practice Act occurred.

COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board find:

ARS § 32-2232 (12) as it relates to AAC R3-11-501 (1) failure to use current professional and scientific knowledge with respect to failure to provide additional diagnostics to differentiate if the dog's pain was related to the suspected gastrointestinal issues or the history of the IVDD.

Vote: The motion was approved with a vote of 4 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.



Tracy A. Riendeau, CVT Investigative Division